# **Complete Summary**

#### **TITLE**

Speech and language function: proportion of stroke patients in each risk-adjusted group that make at least one level of progress on the Problem Solving Functional Communication Measure (FCM).

# SOURCE(S)

National Center for Evidence-Based Practice in Communication Disorders. National Outcomes Measurement System: Adults in health care speech-language pathology user's guide. Rockville (MD): American Speech-Language-Hearing Association; 2003. 53 p.

#### **Measure Domain**

#### PRIMARY MEASURE DOMAIN

Outcome

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the Measure Validity page.

#### **SECONDARY MEASURE DOMAIN**

Does not apply to this measure

# **Brief Abstract**

# **DESCRIPTION**

The measure is used to assess the proportion of stroke patients in each riskadjusted group, ages 16 years and older, that make at least one level of progress on the Problem Solving Functional Communication Measure (FCM).

The Problem Solving FCM is one of 15 FCM scales which are used to measure outcomes of speech and language therapy in the realm of swallowing and 14 areas of communication over time. Each scale is composed of seven-point ratings ranging from least functional (level 1) to most functional (level 7).

#### **RATIONALE**

Changes in Functional Communication Measure (FCM) level provide information on the benefits of treatment designed to enhance functional communication and swallowing. FCMs were designed to describe aspects of a patient's functional communication and swallowing abilities over time from admission to discharge in various speech-language pathology treatment settings.

#### PRIMARY CLINICAL COMPONENT

Stroke; speech and language intervention; problem solving

#### **DENOMINATOR DESCRIPTION**

Stroke patients, ages 16 years and older, with a treatment plan recommending speech and language intervention for a minimum of two sessions. Patients must receive speech and language intervention using either an individual and/or group treatment model or a training and/or consultation model.

See the related "Denominator Inclusions/Exclusions" field in the Complete Summary.

#### **NUMERATOR DESCRIPTION**

The number of stroke patients in each risk-adjusted group that make at least one level of progress on the Problem Solving Functional Communication Measure (FCM)

**Note**: Refer to the original measure documentation for additional details.

## **Evidence Supporting the Measure**

#### **EVIDENCE SUPPORTING THE CRITERION OF QUALITY**

 A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences

## **Evidence Supporting Need for the Measure**

#### **NEED FOR THE MEASURE**

Use of this measure to improve performance

## **EVIDENCE SUPPORTING NEED FOR THE MEASURE**

American Speech-Language-Hearing Association (ASHA). Inpatient. National Data Report 2008. Rockville (MD): American Speech-Language-Hearing Association (ASHA); 2008. 35 p.

American Speech-Language-Hearing Association (ASHA). Outpatient (hospital outpatient, rehab outpatient, office-based services, day treatment). National Data

Report 2008. Rockville (MD): American Speech-Language-Hearing Association (ASHA); 2008. 33 p.

American Speech-Language-Hearing Association (ASHA). Skilled nursing. National Data Report 2008. Rockville (MD): American Speech-Language-Hearing Association (ASHA); 2008. 35 p.

American Speech-Language-Hearing Association. Acute inpatient. National Data Report 2008. Rockville (MD): American Speech-Language-Hearing Association (ASHA); 2008. 35 p.

# **State of Use of the Measure**

#### **STATE OF USE**

Current routine use

#### **CURRENT USE**

Accreditation
Internal quality improvement
National reporting

# **Application of Measure in its Current Use**

#### **CARE SETTING**

Ambulatory Care
Ancillary Services
Behavioral Health Care
Community Health Care
Home Care
Hospices
Hospitals
Long-term Care Facilities
Physician Group Practices/Clinics
Rehabilitation Centers
Residential Care Facilities

#### PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Speech-Language Pathologists

## LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

## **TARGET POPULATION AGE**

Age greater than or equal to 16 years

## **TARGET POPULATION GENDER**

Either male or female

## STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

# **Characteristics of the Primary Clinical Component**

# INCIDENCE/PREVALENCE

Unspecified

## **ASSOCIATION WITH VULNERABLE POPULATIONS**

Unspecified

## **BURDEN OF ILLNESS**

Unspecified

## **UTILIZATION**

Unspecified

## **COSTS**

Unspecified

# **Institute of Medicine National Healthcare Quality Report Categories**

## **IOM CARE NEED**

Getting Better Living with Illness

#### **IOM DOMAIN**

Effectiveness

# **Data Collection for the Measure**

#### **CASE FINDING**

Users of care only

## **DESCRIPTION OF CASE FINDING**

Stroke patients, ages 16 years and older, with a treatment plan that recommends speech and language intervention for a minimum of two treatment sessions (see the "Denominator Inclusions/Exclusions" field)

#### **DENOMINATOR SAMPLING FRAME**

Patients associated with provider

## **DENOMINATOR INCLUSIONS/EXCLUSIONS**

#### Inclusions

- Patients, ages 16 years and older, with a treatment plan recommending speech and language intervention for a minimum of two sessions
- Patients who have had a stroke
- Patients receiving speech and language intervention using one of two treatment models:
  - Individual and/or group treatment model
  - Training and/or consultation model
- Patients who have demonstrated sufficient attention and memory skills to be scored on this Functional Communication Measure (FCM) (functioning at a minimum of level 3 on the Attention and Memory FCMs)

Note: Refer to the original measure documentation for additional details.

#### **Exclusions**

- Patients seen for evaluation only
- Adults with developmental disabilities

#### RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

## **DENOMINATOR (INDEX) EVENT**

Clinical Condition
Therapeutic Intervention

#### **DENOMINATOR TIME WINDOW**

Time window brackets index event

# **NUMERATOR INCLUSIONS/EXCLUSIONS**

#### Inclusions

The number of stroke patients in each risk-adjusted group that make at least one level of progress on the Problem Solving Functional Communication Measure (FCM)

**Note**: Refer to the original measure documentation for additional details.

#### **Exclusions**

Unspecified

# MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

## **NUMERATOR TIME WINDOW**

Episode of care

#### **DATA SOURCE**

Administrative data Special or unique data

# LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

# **OUTCOME TYPE**

**Functional Status** 

## **PRE-EXISTING INSTRUMENT USED**

Unspecified

# **Computation of the Measure**

#### **SCORING**

Rate

## **INTERPRETATION OF SCORE**

Better quality is associated with a higher score

#### **ALLOWANCE FOR PATIENT FACTORS**

Unspecified

# STANDARD OF COMPARISON

External comparison at a point in time External comparison of time trends Internal time comparison

# **Evaluation of Measure Properties**

#### **EXTENT OF MEASURE TESTING**

Unspecified

# **Identifying Information**

#### **ORIGINAL TITLE**

Functional Communication Measure: Problem Solving.

#### **MEASURE COLLECTION**

National Outcomes Measurement System

#### **MEASURE SET NAME**

**Functional Communication Measures** 

#### **DEVELOPER**

American Speech-Language-Hearing Association

## **FUNDING SOURCE(S)**

A portion of the American Speech-Language-Hearing Association (ASHA) membership dues contributed to the design of the National Outcomes Measurement System, which includes the Functional Communication Measures (FCMs).

#### COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

American Speech-Language-Hearing Association (ASHA) solicited input via publications, communication with larger health care facilities, presentations and other public input regarding specific treatment areas on which Functional Communication Measures (FCMs) should be based. Speech-language pathologists with a wide variety of clinical expertise were appointed to an advisory group that met to discuss the target measures.

## FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

None

#### **ADAPTATION**

Measure was not adapted from another source.

#### **RELEASE DATE**

1998 Jan

#### **REVISION DATE**

2003 Jan

#### **MEASURE STATUS**

This is the current release of the measure.

#### SOURCE(S)

National Center for Evidence-Based Practice in Communication Disorders. National Outcomes Measurement System: Adults in health care speech-language pathology user's guide. Rockville (MD): American Speech-Language-Hearing Association; 2003. 53 p.

#### **MEASURE AVAILABILITY**

The individual measure, "Functional Communication Measure: Problem Solving," is published in "National Outcomes Measurement System: Adults in Healthcare Speech-Language Pathology User's Guide." This document is available in Portable Document Format (PDF) from the <u>American Speech-Language-Hearing Association</u> Web site.

For more information, please contact American Speech-Language-Hearing Association at 2200 Research Boulevard, Rockville, MD 20850-3289; Phone: 301-296-5700; Web site: <a href="http://www.asha.org/default.htm">http://www.asha.org/default.htm</a>.

#### **NQMC STATUS**

This NQMC summary was completed by ECRI Institute of May 19, 2009. The information was verified by the measure developer on July 7, 2009.

## **COPYRIGHT STATEMENT**

No copyright restrictions apply.

#### Disclaimer

#### **NQMC DISCLAIMER**

The National Quality Measures Clearinghouse $^{\text{TM}}$  (NQMC) does not develop, produce, approve, or endorse the measures represented on this site.

All measures summarized by NQMC and hosted on our site are produced under the auspices of medical specialty societies, relevant professional associations, public and private organizations, other government agencies, health care organizations or plans, individuals, and similar entities.

Measures represented on the NQMC Web site are submitted by measure developers, and are screened solely to determine that they meet the NQMC Inclusion Criteria which may be found at

http://www.qualitymeasures.ahrq.qov/about/inclusion.aspx.

NQMC, AHRQ, and its contractor ECRI Institute make no warranties concerning the content or its reliability and/or validity of the quality measures and related materials represented on this site. The inclusion or hosting of measures in NQMC may not be used for advertising or commercial endorsement purposes.

Readers with questions regarding measure content are directed to contact the measure developer.

Copyright/Permission Requests

Date Modified: 8/3/2009

